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Exempt Organization Business Income Tax Return (and proxy tax under section 6033(e))

2011

Department of the Treasury Internal Revenue Service

For calendar year 2011 or other tax year beginning JUL 1, 2011 and ending JUN 30, 2012

Open to Public Inspection for 501(c)(3) Organizations Only

Header section containing organization name (HILLEL FOUNDATION OF CAMBRIDGE, INC.), address (52 MT AUBURN STREET, CAMBRIDGE, MA 02138), EIN (04-2620801), and book value of assets (7,423,851).

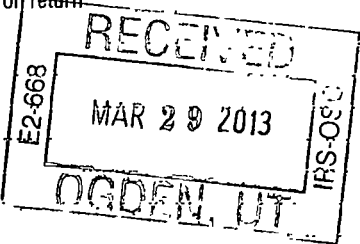
Section H: Describe the organization's primary unrelated business activity. NONE. Section I: During the tax year, was the corporation a subsidiary in an affiliated group or a parent-subsidiary controlled group? No.

J The books are in care of DAVIES & MONAHAN PC Telephone number 617-769-9600

Table with 4 columns: (A) Income, (B) Expenses, (C) Net, and a description column. Rows 1a-13 showing various income and expense categories, with a total of 0.

Part II Deductions Not Taken Elsewhere (See instructions for limitations on deductions) (Except for contributions, deductions must be directly connected with the unrelated business income.)

Table with 4 columns: (A) Income, (B) Expenses, (C) Net, and a description column. Rows 14-34 showing various deduction categories, with a total of 1,000 for line 33.



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**Part III Tax Computation**

**35 Organizations Taxable as Corporations** See instructions for tax computation.  
 Controlled group members (sections 1561 and 1563) check here  See instructions and:

a Enter your share of the \$50,000, \$25,000, and \$9,925,000 taxable income brackets (in that order):  
 (1) \$ \_\_\_\_\_ (2) \$ \_\_\_\_\_ (3) \$ \_\_\_\_\_

b Enter organization's share of: (1) Additional 5% tax (not more than \$11,750) \$ \_\_\_\_\_  
 (2) Additional 3% tax (not more than \$100,000) \$ \_\_\_\_\_

c Income tax on the amount on line 34 **35c** 0.

**36 Trusts Taxable at Trust Rates.** See instructions for tax computation. Income tax on the amount on line 34 from:  
 Tax rate schedule or  Schedule D (Form 1041) **36**

**37 Proxy tax.** See instructions **37**

**38 Alternative minimum tax** **38**

**39 Total.** Add lines 37 and 38 to line 35c or 36, whichever applies **39** 0.

**Part IV Tax and Payments**

**40a Foreign tax credit** (corporations attach Form 1118; trusts attach Form 1116) **40a**

**b Other credits** (see instructions) **40b**

**c General business credit.** Attach Form 3800 **40c**

**d Credit for prior year minimum tax** (attach Form 8801 or 8827) **40d**

**e Total credits.** Add lines 40a through 40d **40e**

**41 Subtract line 40e from line 39** **41** 0.

**42 Other taxes.** Check if from:  Form 4255  Form 8611  Form 8697  Form 8866  Other (attach schedule) **42**

**43 Total tax.** Add lines 41 and 42 **43** 0.

**44 a Payments:** A 2010 overpayment credited to 2011 **44a**

**b 2011 estimated tax payments** **44b**

**c Tax deposited with Form 8868** **44c**

**d Foreign organizations:** Tax paid or withheld at source (see instructions) **44d**

**e Backup withholding** (see instructions) **44e**

**f Credit for small employer health insurance premiums** (Attach Form 8941) **44f**

**g Other credits and payments:**  Form 2439  Form 4136  Other \_\_\_\_\_ Total **44g**

**45 Total payments.** Add lines 44a through 44g **45**

**46 Estimated tax penalty** (see instructions). Check if Form 2220 is attached  **46**

**47 Tax due.** If line 45 is less than the total of lines 43 and 46, enter amount owed **47** 0.

**48 Overpayment.** If line 45 is larger than the total of lines 43 and 46, enter amount overpaid **48** 0.

**49 Enter the amount of line 48 you want:** Credited to 2012 estimated tax  Refunded  **49**

**Part V Statements Regarding Certain Activities and Other Information** (see instructions)

**1** At any time during the 2011 calendar year, did the organization have an interest in or a signature or other authority over a financial account (bank, securities, or other) in a foreign country? If YES, the organization may have to file Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts. If YES, enter the name of the foreign country here \_\_\_\_\_ **Yes** **No**


**2** During the tax year, did the organization receive a distribution from, or was it the grantor of, or transferor to, a foreign trust? If YES, see instructions for other forms the organization may have to file \_\_\_\_\_ **X**

**3** Enter the amount of tax-exempt interest received or accrued during the tax year  \$ \_\_\_\_\_ **X**

**Schedule A - Cost of Goods Sold.** Enter method of inventory valuation  N/A

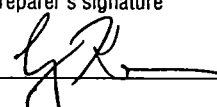
<b>1</b> Inventory at beginning of year	<b>1</b>	<b>6</b> Inventory at end of year	<b>6</b>
<b>2</b> Purchases	<b>2</b>	<b>7 Cost of goods sold.</b> Subtract line 6 from line 5. Enter here and in Part I, line 2	<b>7</b>
<b>3</b> Cost of labor	<b>3</b>	<b>8</b> Do the rules of section 263A (with respect to property produced or acquired for resale) apply to the organization?	<b>Yes</b> <b>No</b>
<b>4a</b> Additional section 263A costs	<b>4a</b>		
<b>b</b> Other costs (attach schedule)	<b>4b</b>		
<b>5 Total.</b> Add lines 1 through 4b	<b>5</b>		

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete. Declaration of preparer (other than taxpayer) is based on all information of which preparer has any knowledge.

**Sign Here**  **3/22/13** **EXECUTIVE DIRECTOR**  
 Signature of officer Date Title

May the IRS discuss this return with the preparer shown below (see instructions)?  Yes  No

**Paid Preparer Use Only**

Print/Type preparer's name: **CRAIG KLEIN** Preparer's signature:  Date: **3/18/13** Check  if self-employed PTIN: **P00734640**

Firm's name **CBIZ TOFIAS** Firm's EIN **26-3753134**  
 Firm's address **500 BOYLSTON STREET BOSTON, MA 02116** Phone no. **617-761-0600**